

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008528	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 09/15/2020
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NAME OF PROVIDER OR SUPPLIER SHAWNEE SENIOR LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 1901 13TH STREET HERRIN, IL 62948
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S 000	<p>Initial Comments</p> <p>Complaint Investigation</p> <p>2056957/IL126436 2057196/IL126703</p> <p>A Focused Infection Control Survey/COVID-19 Focused Survey was conducted by the Illinois Department of Public Health on September 15, 2020.</p> <p>Survey Census: 72</p> <p>Total Sample: 22</p>	S 000		
S9999	<p>Final Observations</p> <p>Statement of Licensure Violations</p> <p>300.696a) 300.696b) 300.696c)2) 300.696c)7) 300.1210b) 300.3240a)</p> <p>Section 300.696 Infection Control</p> <p>a) Policies and procedures for investigating, controlling, and preventing infections in the facility shall be established and followed. The policies and procedures shall be consistent with and include the requirements of the Control of Communicable Diseases Code (77 Ill. Adm. Code 690) and Control of Sexually Transmissible Diseases Code (77 Ill. Adm. Code 693). Activities shall be monitored to ensure that these policies and procedures are followed.</p>	S9999	<p style="text-align: center;">Attachment A Statement of Licensure Violations</p>	

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 10/01/20
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S9999	<p>Continued From page 1</p> <p>b) A group, i.e., an infection control committee, quality assurance committee, or other facility entity, shall periodically review the results of investigations and activities to control infections.</p> <p>c) Each facility shall adhere to the following guidelines of the Center for Infectious Diseases, Centers for Disease Control and Prevention, United States Public Health Service, Department of Health and Human Services (see Section 300.340):</p> <p>2) Guideline for Hand Hygiene in Health-Care Settings</p> <p>7) Guidelines for Infection Control in Health Care Personnel</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident.</p> <p>Section 300.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>These Requirements are not met as evidenced by:</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>Based on observation, interview, and record review the facility failed to: 1. Ensure disinfectant used to treat non-porous surfaces for Covid-19 was utilized per manufacturer guidelines to complete the required contact time for effective disinfection. 2. Require N95 grade facemask application for staff working on Covid-19 positive units. 3. Complete sanitization of hands prior to exiting the Covid-19 positive units. 4. Prevent cross contamination between staff working designated Covid-19 positive units versus those working Non Covid-19 positive units. 5. Provide adequate resident supervision to ensure Covid-19 positive residents remain within the designated Covid-19 isolation halls. These systemic failures have resulted in 69 residents testing positive for Covid-19, with death being the result for eleven of those residents (R1, R8, R11, R12, R14, R15, R16, R17, R18, R19, R20) who were confirmed positive. These failures have the potential to affect all 72 residents residing in the facility.</p> <p>Findings Include:</p> <p>1. On 9/4/20 at 2:45 PM, V2 (Director of Nursing) stated the facility has had 7 residents expire in the facility, and 1 expired in the hospital due to Covid-19 at the time of this interview. V2 stated prior to the Covid-19 diagnosis, none of the 8 deceased were expected to pass, were receiving end of life services, hospice, or comfort care measures. V2 contributes the 8 deaths to Covid-19.</p> <p>On 9/9/2020 at 1:55 PM, V3 (Assistant Director of Nursing) stated that R21 was the facility's first resident confirmed Covid-19 case after being tested individually at the local hospital. V3 stated R21 was tested for Covid-19 on 8/8/20. V3 stated from 8/8/20 until current, the facility has had 69</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>positive resident Covid-19 cases and 11 resident deaths due to Covid-19.</p> <p>A timeline provided by the facility on 9/4/20 documents the following weekly Covid-19 results since all facility staff and resident testing began:</p> <p>First Covid-19 positive date: Staff (V31) tested on 7/29/2020. Results of positive nature were reported on 8/2/2020 by V31 to the facility.</p> <p>Facility Mass Testing Date Began: 8/2/20 & 8/3/2020</p> <ul style="list-style-type: none"> - # positive residents: 0 - #positive staff: 5 - # residents hospitalized with this week: 0 - #residents ER visit d/t (due to) Covid this week: 0 - #residents expired this week: 0 <p>Facility Mass Testing Date: 8/9/2020 & 8/10/2020</p> <ul style="list-style-type: none"> - # positive residents: 16 - # positive staff: 14 - # residents hospitalized with this week: 3 - # residents ER visit d/t Covid this week: 2 - # residents expired this week: 0 <p>Facility Mass Testing Date: 8/16/2020 & 8/17/2020</p> <ul style="list-style-type: none"> - # positive residents: 20 - # positive staff: 15 - # residents hospitalized with this week: 1 - # residents ER visit d/t Covid this week: 2 - # residents expired this week: 0 <p>Facility Mass Testing Date: 8/23/2020 & 8/24/2020</p> <ul style="list-style-type: none"> - # positive residents: 16 - # positive staff: 7 - # residents hospitalized with this week: 2 	S9999		

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S9999	<p>Continued From page 4</p> <ul style="list-style-type: none"> - # residents ER visit d/t Covid this week: 1 - # residents expired this week: 5 <p>Facility Mass Testing Date: 8/30/2020 & 8/31/2020</p> <ul style="list-style-type: none"> - # positive residents: 13 - # positive staff: 8 - # residents hospitalized with this week: 2 - # residents ER visit d/t Covid this week: 0 - # residents expired this week: 2 <p>Review of R14's Clinical Record documents a positive Covid-19 test date of 8/16/20. R14's Clinical Record does not indicate R14 was being treated for end of life services prior to R14's positive Covid-19 diagnosis. R14's Clinical Record documents R14 expired in the facility on 8/24/20. Review of R14's "Certificate of Death Worksheet" dated 8/26/20 confirms the date of death as 8/24/20 with the sole "Cause of Death" listed as "A. Covid Infection."</p> <p>Review of R15's Clinical Record documents a positive Covid-19 test date of 8/16/20. R15's Clinical Record does not indicate R15 was being treated for end of life services prior to R15's positive Covid-19 diagnosis. R15's Clinical Record documents R15 expired in the facility on 8/25/20. Review of R15's "Certificate of Death Worksheet" dated 8/27/20 confirms the date of death as 8/25/20 with the sole "Cause of Death" listed as "A. Covid."</p> <p>Review of R16's Clinical Record documents a positive Covid-19 test date of 8/9/20. R16's Clinical Record does not indicate R16 was being treated for end of life services prior to R16's positive Covid-19 diagnosis. R16's Clinical Record documents R16 expired in the facility on 8/28/20. Review of R16's "Certificate of Death</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>Worksheet" dated 9/1/20 confirms the date of death as 8/28/20 with the sole "Cause of Death" listed as "A. Novel Corona Covid-19 Virus Infection."</p> <p>On 9/3/20 review of the not dated article titled "List N: Disinfectants for Use Against SARS-CoV-2 (Covid-19)" and found at https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19 stated, "When using an EPA (Environmental Protection Agency)-registered disinfectant, follow the label directions for safe, effective use. Make sure to follow the contact time, which is the amount of time the surface should be visibly wet"</p> <p>"PH7Q Dual" product information found at "https://www.betco.com/products/ph7q-dual/35504" on 9/3/20 stated: "FOR USE AS A ONE-STEP GENERAL, HOSPITAL, MEDICAL DISINFECTANT, FUNGICIDE, VIRUCIDE* AND CLEANER: 1. Pre-clean heavily soiled areas. 2. Apply use solution of 0.5 oz. of this product per gal. of water (or equivalent use dilution) to disinfect hard, non-porous surfaces with a sponge, brush, cloth, mop, auto scrubber, mechanical spray device, coarse pump or trigger spray device. For spray applications, spray 6-8 inches from surface. Do not breathe spray. 3. Treated surfaces must remain wet for 10 minutes. 4. Allow to air dry. 5. Prepare a fresh solution daily or when visibly dirty." This product is documented as being an effective disinfectant for Covid-19 when a 10-minute contact time occurs.</p> <p>On 9/3/20 at 2:30 PM, V14 (Customer Service Representative for sanitizing manufacturer) stated that "pH7Q Dual" is effective against killing Covid-19 with a 10-minute dwell time on the</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>surface being treated. V14 stated without the surface remaining wet for 10 minutes, "pH7Q Dual" would not be effective in killing Covid-19. V14 stated the company does offer other disinfectant products effective against Covid-19, with one having a 3-minute dwell time. V14 confirmed that the company he works for is the manufacturer of "pH7Q."</p> <p>On 9/4/20 at 8:58 AM, V13 (Medical Director) stated he agrees that Covid-19 is a highly contagious virus that has resulted in death and/or severe illness for some. V13 acknowledged the long-term care facility population are considered high risk for Covid-19. V13 stated he would expect the facility to follow all CDC (Center for Disease Control) guidelines regarding Covid-19 and infection control standards of practice. V13 stated he would expect the facility to be utilizing an approved disinfectant per manufacturer guidelines to provide effective disinfection, in an effort to eradicate the spread of Covid-19.</p> <p>On 9/2/20 at 10:20 AM, V12 (Maintenance Supervisor) stated that for disinfecting, staff use "pH7Q Dual" with a 10-minute dwell time, which is approved to kill Covid-19. V12 stated this a premixed solution that a distributor provides to the facility and services the machines that mix the solution. V12 stated there have been no known problems with the solution. V12 stated mop pads are saturated in the solution and used to wipe the floors and the walls if needed. V12 stated a battery-operated sprayer is used to spray the non-porous surfaces of the beds. V12 stated when staff wipe the high touch surface areas, they spray the handrail or doorknob, etc. (etcetera) and then use a rag that has been sprayed with the solution to "dab," so it doesn't drip. V12 stated they don't time the solution being</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>wet, but it "definitely doesn't dry before 10 minutes." V12 stated he has educated the housekeeping staff along with CNA (Certified Nurse Assistant) staff on how to clean high touch surface areas.</p> <p>On 9/3/20 at 8:58 AM, V15 (Housekeeping) stated she has worked in housekeeping at the facility for 11 days. V15 stated she has been trained regarding infection control procedures with Covid-19 and effective cleaning methods. V15 stated the facility uses "pH7Q Dual" to clean surfaces including floors, walls, doorknobs, handrails, counter tops, other high touch surface areas, etcetera. V15 described the process of cleaning a hard surface, with a handrail being used as the example, as spraying "pH7Q Dual" onto the surface, waiting 5 - 10 minutes then using a dry rag to wipe the disinfectant off. On 9/3/20 at 9:04 AM, V15 was observed entering an occupied resident room on the Non Covid-19 positive unit with a spray bottle of "pH7Q Dual" and dry rag. During continuous observation, at 9:05 AM, V15 was observed spraying the bathroom sink and toilet with "pH7Q." At 9:06 AM, V15 was observed draping the dry rag over the edge of the sink covering an area that had just been sprayed with "pH7Q," and stepping back from the sink area. At 9:07 AM, V15 was observed picking up the dry rag from the sink edge and began wiping the sink surface. At 9:07, AM V15 acknowledged the sink surface is dry and this is her normal disinfecting process.</p> <p>On 9/3/20 at 9:29 AM, V16 (Housekeeping) stated she has worked in housekeeping at the facility for approximately 3 months. V16 was observed as providing housekeeping services on a Covid-19 positive unit. V16 stated "pH7Q Dual" disinfectant is used to clean surfaces including</p>	S9999		
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S9999	<p>Continued From page 8</p> <p>doorknobs, handrails, floors, etc. V16 described the process of disinfecting a handrail as spraying a rag with "pH7Q Dual," "lightly" spraying "pH7Q Dual" onto the rail, then blotting off any that may be run with her sprayed rag. V16 stated she only sprays the handrails "lightly" as to not "mess up the wallpaper." On 9/3/20 at 9:34 AM, V16 was observed demonstrating this practice with continuous observation. V16 was observed spraying 4 sprays of "pH7Q Dual" onto a dry rag. V16 then sprayed a portion of the handrail with "pH7Q" and immediately began blotting the rail with her rag, creating a dry surface within less than a minute. This surveyor touched the rail to ensure the dry status, as well as V16 acknowledging the dry surface. When asked if there was any certain amount of contact time needed for appropriate disinfection, V16 replied 10 minutes, despite the observation not including a 10-minute dwell time. V16 was observed as continuing this same cleaning practice following her interview and demonstration of cleaning. V16 acknowledged this is her normal disinfecting process.</p> <p>On 9/1/20 at 12:56 PM, V17 (Housekeeping) stated the facility uses "pH7Q Dual" to disinfect surfaces. V17 was observed spraying handrails within the Covid-19 positive unit with "pH7Q Dual" and immediately wiping them off with a rag. This was observed as creating a dry surface prior to the required 10-minute contact time.</p> <p>On 9/3/20 at 9:30 AM, V8 (Housekeeping) stated "pH7Q Dual" is the disinfectant they use to spray the walls and the high touch surface areas. V8 described dampening a rag with the disinfectant and patting the spray on the high touch surface area. V8 stated the disinfectant is supposed to stay wet 10 minutes on the floor and 5-10</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>minutes on the high touch areas. V8 stated she has worked at the facility for 28 years.</p> <p>On 9/3/20 at 9:36 AM, V18 (Licensed Practical Nurse/LPN) stated she has worked at the facility for 4 years. V18 stated she cannot recall any time when surfaces such as the countertop of the nurse's station have been left wet with disinfectant. V18 stated she recalls observing housekeeping staff spray and wipe surfaces.</p> <p>2. On 9/3/20 review of the article titled "Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic," dated July 15, 2020 and found at https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html state, "HCP (Health Care Professionals) who enter the room of a patient with suspected or confirmed SARS-CoV-2 (Covid-19) infection should adhere to Standard Precautions and use a NIOSH-approved N95 or equivalent or higher-level respirator (or facemask if a respirator is not available), gown, gloves, and eye protection."</p> <p>On 9/3/20 review of the article titled "Strategies for Optimizing the Supply of Facemasks" dated June 28, 2020 and found at https://www.cdc.gov/coronavirus/2019-ncov/hcp/pre-strategy/face-masks.html stated, "In settings where facemasks are not available, HCP (health care personnel) might use homemade masks (e.g., bandana, scarf) for care of patients with COVID-19 as a last resort. However, homemade masks are not considered PPE, since their</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>capability to protect HCP is unknown. Caution should be exercised when considering this option. Homemade masks should ideally be used in combination with a face shield that covers the entire front (that extends to the chin or below) and sides of the face."</p> <p>The facility policy titled "Policy and Procedure for Suspected or Confirmed Coronavirus (Covid-19)" with a most recent revision date of 7/28/20 stated under the section "Personal Protective Equipment (PPE) and Supplies ...Full PPE should be worn per CDC (Center for Disease Control) guidelines for the care of any resident with known or suspected Covid-19 per CDC guidance on conservation of PPE."</p> <p>On 9/4/20 at 8:58 AM, V13 (Medical Director) stated he would expect the facility to follow all CDC guidelines regarding Covid-19 and infection control standards of practice.</p> <p>On 9/1/20 at 11:50 AM, V2 (Director of Nursing) and V3 (Assistant Director of Nursing) both confirmed the facility has experienced no shortage of any type of PPE at any time and verify N95 grade masks are available for staff use.</p> <p>On 9/3/20 at 9:14 AM, V1 (Administrator) confirmed the facility has always had N95 grade masks available for staff use since Covid-19 began around March. V1 stated staff can choose to wear either a surgical mask with face shield, or N95 grade mask with face shield despite being on or off the Covid-19 positive units. V1 stated most staff prefer the surgical mask with face shield due to the increased ability to breathe. V1 stated some staff did express their desire to wear an N95 grade mask, although they were not</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>comfortable with the ones the facility provided. V1 stated the facility allowed those staff to be fit tested at the local hospital for an N95 grade mask.</p> <p>On 9/3/20 at 9:25 AM, V19 (Laundry/Housekeeping) stated she normally works in laundry but is helping with housekeeping also currently. V19 was observed providing housekeeping services on the Covid-19 positive unit with a surgical mask, face shield, gown, and gloves in place. V19 acknowledged an N95 grade mask is offered and available at the facility, but stated she chooses to wear a surgical mask because it is easier for her to breathe and cooler. V19 stated mask choices are available daily when screened at the beginning of the shift, but also throughout the day if the mask becomes soiled or an additional one is needed.</p> <p>On 9/3/20 at 9:29 AM, V16 was observed as providing housekeeping services on the Covid-19 positive unit. V16 was observed as wearing a gown, gloves, face shield, and surgical mask below her nose, exposing her nares. During this interview, V16 was observed as reaching a gloved hand inside her face shield to pull the surgical mask up over her nose.</p> <p>On 9/3/20 at 9:58 AM, V20 (CNA) was observed wearing a cloth tie-dye face mask, face shield, and gown while working the Covid-19 positive unit in the facility. V20 acknowledged the facility provides surgical and N95 grade face masks for staff use. V20 stated the tie-dye mask was purchased from a boutique in a neighboring state.</p> <p>On 9/1/20 at 1:29 PM, V21 (Social Services) was observed wearing a gown, surgical mask, and face shield while working on the Covid-19 positive</p>	S9999		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008528	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 09/15/2020
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NAME OF PROVIDER OR SUPPLIER SHAWNEE SENIOR LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 1901 13TH STREET HERRIN, IL 62948
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unit. V21 acknowledged N95 masks are available for use, but stated staff choose if they would like to wear the N95 mask or surgical mask. V21 stated there has been no shortage of PPE at the facility.

On 9/1/20 at 1:03 PM, V22 (LPN) was observed working the Covid-19 positive unit wearing a gown, face shield, and surgical mask. V22 stated the facility has an N95 grade mask available for staff to wear if preferred but are not required. V22 stated staff choose if they want to wear a surgical or N95 grade mask.

On 9/1/20 at 12:58 PM, V23 (Activities Assistant) was observed within 1 foot of Covid-19 positive residents while delivering mail, wearing a surgical mask, face shield, and gown. V23 acknowledged an N95 grade mask is available to use, but stated she chooses to wear a surgical mask. V23 stated she works both the positive and non-positive Covid-19 units currently.

On 9/3/20 at 9:00 AM, the facility was observed and V2 reported the facility has a surplus of all types of PPE, including N95 grade masks. N95 grade masks were observed as being available as well as surgical masks at the staff screening checkpoint.

3. Review of an article on 9/3/20 titled, "Hand Hygiene Recommendations" dated May 17, 2020 and found at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/hand-hygiene.html> stated, "Hand hygiene is an important part of the U.S. (United States) response to the international emergence of COVID-19. Practicing hand hygiene, which includes the use of alcohol-based hand rub (ABHR) or handwashing, is a simple yet effective

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S9999	<p>Continued From page 13</p> <p>way to prevent the spread of pathogens and infections in healthcare settings. CDC recommendations reflect this important role."</p> <p>On 9/3/20 at 10:03 AM, V24 (CNA) was observed working the Covid-19 positive unit. During continuous observation prior to V24 exiting the Covid-19 unit, V24 was observed as not wearing gloves, doffing her PPE gown and exiting the Covid unit without completing any hand sanitization. Observation was continued through a window in the door separating the Covid-19 positive and non Covid positive units in which V24 was seen utilizing the facility exit door in which all staff working the Covid-19 and non Covid-19 units use. Alcohol based hand sanitizer was observed as being available at the entrance and exit of both doorways used.</p> <p>On 9/3/20 at 9:50 AM, V11 (CNA) was observed working the Covid-19 positive unit. During continuous observation prior to V11 exiting the Covid-19 unit, V11 was observed removing her gloves, placing them in the trash, then doffing her gown and exit the door without completing hand sanitization. Observation was continued through a window in the door separating the Covid-19 positive and non Covid positive units in which V11 was seen utilizing the facility exit door all staff working the Covid-19 and non Covid-19 units use, with non-sanitized hands.</p> <p>On 9/1/20 at 12:48 PM, V25 (LPN) was observed working the Covid-19 positive unit. During continuous observation prior to V25 exiting the Covid-19 unit, V25 was observed as not wearing gloves, doffing her PPE gown and exiting the Covid unit without completing hand sanitization. Observation was continued through a window in the door separating the Covid-19 positive and non</p>	S9999		

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S9999	<p>Continued From page 14</p> <p>Covid positive units in which V25 was seen utilizing the facility exit door all staff working the Covid-19 and non Covid-19 units use, with non-sanitized hands.</p> <p>On 9/1/20 at 1:45 PM, V1 stated her expectation would be that staff either wash their hands with soap and water or use alcohol-based hand sanitizer after doffing their gown and exiting the Covid-19 positive unit. V1 acknowledged the door in which staff are exiting the Covid-19 positive unit without washing and/or sanitizing is a door that is utilized by all staff within the facility as they enter that door for Covid-19 screening prior to beginning their shift.</p> <p>4. On 9/1/20 at 1:10 PM, V20 (CNA) was observed in an open doorway separating the Covid-19 positive from negative hallway of the building. V20 was observed donned in a gown, surgical face mask, and face shield as she was working the Covid-19 positive hallway. V26 (CNA) was observed as being in the same doorway as V20 and donned only in a surgical mask and face shield, as he was working the Non-Covid positive hallway. V20 was observed coming in direct contact with V26, including his clothing during an episode that can be described as horse play where V20 playfully hit V26 in the upper arm and was pushing V26 with her hands. V26 and V20 then returned to their assigned halls and closed the door.</p> <p>On 9/3/20 at 9:14 AM, V1 stated she spoke with V20 and the facility has re-educated her on infection control practices and cross contamination prevention.</p> <p>5. On 9/3/20 at 9:00 AM, R13 was observed exiting the Covid-19 positive unit through the</p>	S9999		

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S9999	<p>Continued From page 15</p> <p>closed double doors and entered the Non Covid-19 positive side of the facility. R13 was observed as being guided back to the Covid-19 unit by V22 after ambulating for a period of less than 5 minutes down the Non Covid-19 positive unit.</p> <p>R13's Clinical Record documents R13 was tested for Covid-19 on 8/24/20, with a positive test result received on 8/26/20. R13 was placed on the facility Covid-19 positive isolation unit at that time. R13's Clinical Record documents a Minimum Data Set dated 8/31/20 indicating R13's cognitive level as "moderately impaired."</p> <p>On 9/3/20 at 9:40 AM, V10 (LPN) stated that they do have residents that wander. V10 stated there is no alarm on the interior door, but some residents have a personal wandering device that would sound if they would try to go out the exit doors to the outside. V10 stated they just try to watch the doors to keep Covid-19 positive residents residing on the Covid-19 positive unit from entering the Non Covid-19 side of the facility.</p> <p>On 9/3/20 at 9:30 AM, V9 (LPN) stated that no doors are alarmed for when a confused resident would possibly pass through the doors from Covid-19 positive unit to the non Covid-19 positive unit.</p> <p>The facility census sheet provided on 9/1/20 documents 72 residents reside in the facility at this time.</p> <p style="text-align: center;">(A)</p>	S9999		